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APPLICANTS

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** CONTINUING DATA ***** *KCM*
 This appln claims benefit of 60/464,610 04/22/2003

** FOREIGN APPLICATIONS ***** *KCM*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/26/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NC	SHEETS DRAWING 26	TOTAL CLAIMS 63	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>KCM/Motter</i> Examiner's Signature <i>KCM</i> Initials				

ADDRESS

Amersham Health, Inc
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TITLE

MRI/NMR-compatible, tidal volume control and measurement systems, methods, and devices for respiratory and hyperpolarized gas delivery

FILING FEE RECEIVED 1846	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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